Revision: HCFA-PM-91-4

AUGUST 1991

(BPD)

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OMB No.: 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: MINNESOTA

Optional Sliding Scale Premiums Imposed on Qualified Disabled and Working Individuals

Α. The following method is used to determine the monthly premium imposed on qualified disabled and working individuals covered under section 1902(a)(10)(E)(ii) of the Act:

No premium is imposed.

A description of the billing method used is as follows (include due date for premium payment, notification of the consequences of nonpayment, and notice of procedures for requesting waiver of premium payment):

Not Applicable.

**OFFICIAL** 

Description provided on attachment.

TN No.: 91-33 Approval Date: 1-29-92 Effective Date: \_ 10/01/91 Supersedes

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c.	State or local funds und	er other	programs	are used	to pay	for premiums:
	<u> </u>	<i></i> /	No			
	Not Applicable.					

D. The criteria used for determining whether the agency will waive payment of a premium because it would cause an undue hardship on an individual are described below:

Not Applicable.

OFFICIAL

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\*Description provided on attachment.

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